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Γ	UTILITY	Attorney Docket No.		36.P307					
L:	DATENT ADDITION		First Named Inventor or Application		tion Identifier				
	ង្គី TRANSMITTAL	TRANSMITTAL		MOIs-586-587					
	Only for new nonprovisional applications under 37 CFR 1.53(b))		Express Mail L	abel No.	EL664878163US				
Ī	Ω APPLICATION ELEMEN	TS			••••••	ner for Patents			
	See MPEP chapter 600 concerning utility patent ap	oplication contents.	ADDRI	ESS TO:	Box Patent . Washington				
7	Fee Transmittal Form (Submit an original, and a duplicate for fee pro	7.	7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)						
	2. Applicant claims small entity status. See 37 CFR 1.27.	8.	8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)						
	3. X Specification Total Pages 39			a. Computer Readable Form (CRF)					
	4. X Drawing(s) (35 USC 113) Total She		b. Specification Sequence Listing on:						
	5. Oath or Declaration Total Pag		ii. paper						
Ī	a. Newly executed (original or co	ppy)		c S	tatements verifying	identity of above copies			
		(0= 0=0 (00(I))		ACCOM	PANYING APPLICA	ATION PARTS			
	b. Copy from a prior application (for continuation/divisional with	9.		Papers (cover sheet &	& document(s))				
1	i. <u>DELETION OF INV</u> Signed Statement att	10.		(b) Statement is an assignee)	Power of Attorney				
	inventor(s) named in 37 CFR 1.63(d)(2) an	see 11.	English Tra	nslation Document	(if applicable)				
	6 Application Data Sheet See 37 CFR 1.	_ 12. X	12. X Information Disclosure Statement (IDS)/PTO-1449 Copies of IDS Citations						
The same	"Express Mail" mailing label number E Date of Deposit 8/1/0	S 13.		Amendment					
1 4 Em	I hereby certify that this paper or fee is being the United States Postal Service "Express Ma	14. X	14. X Return Receipt Postcard (MPEP 503) (Should be specifically itemized)						
	Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to the Commissioner of Patents and Trademarks, Washington, D. C. 20231.			15. Certified Copy of Priority Document(s) (if foreign priority is claimed)					
	Edvard Kn	16.							
	(Typed or printed name of person mailing								
L	Tipo we of persons mailing paper	or feelway							
١	17. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information:								
•	Continuation Divisional Continuation-in-part (CIP) of prior application No/ Prior application information: Examiner Group/Art Unit:								
	For CONTINUATION OR DIVISIONAL APPS only. The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is								
	considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.								
ł	18. CORRESPONDENCE ADDRESS								
	X Customer Number or Bar Code Label (Insert Customer No. or Attach bar code label here) or Correspondence address below								
ł	NAME								
Address									
	City	State			Zip Code				
1	Country	Telephone			Fax				

CLAIMS	(1) FOR	(2) NUMBER FILED	(3) NUMBER EXTRA	(4) RATE	(5) CALCULATIONS				
	TOTAL CLAIMS (37 CFR 1.16(c))	85 -20 =	65	X \$ 18.00 =	\$1,170.00				
	INDEPENDENT CLAIMS (37 CFR 1.16(b))	3 -3 =	0	X \$ 80.00 =	- 0 -				
	MULTIPLE DEPENDENT	EPENDENT CLAIMS (if applicable) (37 CFR 1.16(d)) \$270.00 =							
				BASIC FEE (37 CFR 1.16(a))	\$ 710.00				
	11	\$2,150.00							
	Reduction by	Reduction by 50% for filing by small entity (Note 37 CFR 1.9, 1.27, 1.28).							
	TOTAL = \$2,150.00								
19. Small entity status a. A small entity statement is enclosed b. A small entity statement was filed in the prior nonprovisional application and such status is and desired. c. Is no longer claimed.									
20. X A check in the amount of \$ 2,150.00 to cover the filing fee is enclosed. 21. A check in the amount of \$ to cover the recordal fee is enclosed. 22. The Commissioner is hereby authorized to credit overpayments or charge the following fees to Deposit Account No. 06-1205:									
						22. T N	The Commissioner is hereby authorized to credit overpayments or charge the following fees to Deposit Account No. 06-1205:		
а	X Fees requ	X Fees required under 37 CFR 1.16.							

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED				
NAME	Carole A. Quinn, Reg. No. 39,000			
SIGNATURE	Carolet Qui			
DATE	August 1, 2001			

Fees required under 37 CFR 1.18.

c.